

STATEMENT OF ECONOMIC INTERESTS

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CITY OF MERCED  
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FAIR POLITICAL  
PRACTICES COMMISSION  
COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Murphy Michael Walker

1. Office, Agency, or Court

Agency Name  
City of Merced  
Division, Board, Department, District, if applicable  
City Council  
Your Position  
Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: See attached list Position: See attached list

2. Jurisdiction of Office (Check at least one box)

☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)  
☐ Multi-County ☐ County of  
☒ City of Merced ☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.  
-or-  
The period covered is / / , through December 31, 2012.  
☐ Assuming Office: Date assumed / /  
☐ Leaving Office: Date Left / / (Check one)  
☐ The period covered is January 1, 2012, through the date of leaving office.  
☐ The period covered is / / , through the date of leaving office.  
☐ Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

☐ Schedule A-1 - Investments - schedule attached ☒ Schedule C - Income, Loans, & Business Positions - schedule attached  
☐ Schedule A-2 - Investments - schedule attached ☒ Schedule D - Income - Gifts - schedule attached  
☒ Schedule B - Real Property - schedule attached ☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge  
I certify under penalty of perjury under the laws of the State of California

Date Signed 03/27/2013  
(month, day, year)

Michael W. Murphy

Form 700- Statement of Economic Interests

<b>Agency</b>	<b>Position</b>
City Council	Council Member
Public Financing and Economic Development Authority	Council Member
Parking Authority	Council Member
Merced Industrial Development Authority	Council Member
Flood Hazard Control Board	Council Member

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>Michael W. Murphy</b>

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
**360 E. Yosemite Ave, Suite 100**

CITY  
**Merced, CA**

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

NATURE OF INTEREST  
☐ Ownership/Deed of Trust      ☐ Easement  
☒ Leasehold less than 1 Yrs. remaining      ☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
☐ None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

NATURE OF INTEREST  
☐ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold      ☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
☐ None

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE      TERM (Months/Years)  
\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD  
☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000  
☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE      TERM (Months/Years)  
\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD  
☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000  
☐ Guarantor, if applicable

Comments:

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>Michael W. Murphy</b>

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
**Orrick, Herrington & Sutcliffe LLP**

ADDRESS (Business Address Acceptable)  
**1000 Marsh Road, Menlo Park, CA 94025**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Law firm**

YOUR BUSINESS POSITION  
**Attorney**

GROSS INCOME RECEIVED

<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary    ☐ Spouse's or registered domestic partner's income

☐ Loan repayment    ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or    ☐ Rental Income, list each source of \$10,000 or more

\_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
**Gunderson Dettmer LLP**

ADDRESS (Business Address Acceptable)  
**360 E. Yosemite Ave, Suite 100**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Law firm**

YOUR BUSINESS POSITION  
**Attorney**

GROSS INCOME RECEIVED

<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000	<input checked="" type="checkbox"/> OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary    ☐ Spouse's or registered domestic partner's income

☐ Loan repayment    ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or    ☐ Rental Income, list each source of \$10,000 or more

\_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD

<input type="checkbox"/> \$500 - \$1,000
<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> OVER \$100,000

INTEREST RATE \_\_\_\_\_%    ☐ None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN

☐ None    ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: I conducted some business within the City of Merced on behalf of Orrick Herrington.

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Michael W. Murphy</u>
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► NAME OF SOURCE (Not an Acronym)  
Marcia Hall

ADDRESS (Business Address Acceptable)  
360 E. Yosemite Ave, Suite 100C

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Accountant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 18 / 12</u>	\$ <u>60</u>	<u>Soroptomist tickets</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>

► NAME OF SOURCE (Not an Acronym)  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>

► NAME OF SOURCE (Not an Acronym)  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>

► NAME OF SOURCE (Not an Acronym)  
Pacific Gas & Electric Company

ADDRESS (Business Address Acceptable)  
3185 M Street, Merced, CA 95348

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Public utility

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 28 / 12</u>	\$ <u>100</u>	<u>CASA fundraiser tickets</u>
<u>09 / 22 / 12</u>	\$ <u>45</u>	<u>BBQ competition tickets</u>
<u>10 / 11 / 12</u>	\$ <u>11</u>	<u>Meal</u>
<u>10/20/12</u>	\$ <u>70</u>	<u>CASA fundraiser tickets</u>

► NAME OF SOURCE (Not an Acronym)  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>

► NAME OF SOURCE (Not an Acronym)  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>                  </u>

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Michael W. Murphy

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

► NAME OF SOURCE (Not an Acronym)

Great Valley Center

ADDRESS (Business Address Acceptable)

1120 13th Street, Suite C

CITY AND STATE

Modesto, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

☒ 501 (c)(3)

American Leadership Forum

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$ 415.96  
(If gift)

TYPE OF PAYMENT: (must check one) ☐ Gift ☒ Income

☒ Made a Speech/Participated in a Panel

☐ Other - Provide Description

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

☐ 501 (c)(3)

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$  
(If gift)

TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

☐ 501 (c)(3)

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$  
(If gift)

TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

☐ 501 (c)(3)

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$  
(If gift)

TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

Comments: \_\_\_\_\_